

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Chris Day for Congress

ADDRESS (number and street)

PO Box 87

Check if different
than previously
reported. (ACC)

New City

NY

10956

2. FEC IDENTIFICATION NUMBER ▼

C

C00557512

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

17

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
10 04 2014in the
State of

NY

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 01 2014

through

M M / D D / Y Y Y Y
10 15 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Cabell Hobbs

Signature of Treasurer

Cabell Hobbs

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 21 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 21

Write or Type Committee Name

Chris Day for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	19854.00	162410.14
(b) Total Contribution Refunds (from Line 20(d))	0.00	650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	19854.00	161760.14
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8638.46	114731.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8638.46	114731.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	47028.75	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 21

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
19854.00	162410.14	15422.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	
(b) All Other Loans		
0.00	0.00	
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
19854.00	162410.14	15422.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 21

Write or Type Committee Name

Chris Day for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
10 / 01 / 2014

To:

M M / D D / Y Y Y Y Y
10 / 15 / 2014**II. DISBURSEMENTS****COLUMN A**
Total this Period**COLUMN B**
Election Cycle Total as of *
(date of general election)
(* See page 5 for date)**COLUMN C**
Total for * (date after general election)
through * (last day of reporting period)
(* See page 5 for dates)

17. OPERATING EXPENDITURES

8638.46

114731.39

7568.79

18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed by the Candidate

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))

0.00

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

0.00

200.00

(b) Political Party Committees

0.00

0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 21

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
---	---	--

(c) Other Political Committees (such as PACs)

0.00

450.00

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00

650.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

8638.46

115381.39

7568.79

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

19854.00

161760.14

15422.00

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

8638.46

114731.39

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

35813.21

24. TOTAL RECEIPTS THIS PERIOD (from Line 16).....

19854.00

25. SUBTOTAL (add Line 23 and Line 24).....

55667.21

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

8638.46

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

47028.75

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 21
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial) ROBERT COHEN			Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2014	
Mailing Address 29 CHERRY LAWN BLVD			Transaction ID : SA11.756	
City NEW ROCHELLE	State NY	Zip Code 10804-1944	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer SELF-EMPLOYED		Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) ROSEANNE COMPOSTO			Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014	
Mailing Address 20 WOODHAVEN DR			Transaction ID : SA11.838	
City NEW CITY	State NY	Zip Code 10956	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) JAMES G. COSTELLO II			Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014	
Mailing Address 24 OLD TAPPAN RD			Transaction ID : SA11.829	
City OLD TAPPAN	State NJ	Zip Code 07675	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION		
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....			1250.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial)

JOHN C. DEMILIA

Mailing Address 168 BEEKMAN AVE.

City

SLEEPY HOLLOW

State

NY

Zip Code

10591-2444

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.843

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMES A. DENBURG

Mailing Address 3 WINDGATE DR.

City

NEW CITY

State

NY

Zip Code

10956

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.837

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RAYMOND J. DIFALCO

Mailing Address 140 S CONGERS AVE

City

CONGERS

State

NY

Zip Code

10920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CEROVENE, INC.

Occupation

V.P.

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.844

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 21
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial) BRIAN EHRLICH		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 19 GOLF COURSE DR.		Transaction ID : SA11.842
City SUFFERN	State NY	Zip Code 10901-3948
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 170.00
Name of Employer SELF-EMPLOYED	Occupation DENTIST	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 399.00	

Full Name (Last, First, Middle Initial) JOSEPH EPNER		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 286 VANDENBURG RD		Transaction ID : SA11.835
City CANAAN	State NY	Zip Code 12029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) EUGENE W. ERICKSON		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 179 WEST MAPLE AVE.		Transaction ID : SA11.856
City MONSEY	State NY	Zip Code 10952-1733
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 170.00
Name of Employer N/A	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 495.00	

SUBTOTAL of Receipts This Page (optional)	590.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

EDMUNDO GONZALEZ

A.

Mailing Address 60 WEST 23RD STREET

City

NEW YORK

State

NY

Zip Code

10010-5283

FEC ID number of contributing
federal political committee.

C

Name of Employer

US VC PARTNERS MANAGEMENT LLC

Occupation

INVESTOR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

Transaction ID : SA11.750

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRANCISCO GONZALEZ

B.

Mailing Address 6 PHILLIPS DR.

City

STONY POINT

State

NY

Zip Code

10980-3451

FEC ID number of contributing
federal political committee.

C

Name of Employer

PORT AUTHORITY OF NY & NJ

Occupation

POLICE INVESTIGATOR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

Transaction ID : SA11.797

Amount of Each Receipt this Period

99.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JEAN R. GOULD

C.

Mailing Address 638 HAVERSTRAW RD

City

SUFFERN

State

NY

Zip Code

10901-2900

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

279.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Transaction ID : SA11.827

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2799.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial)

MICHAEL HIRSCHMailing Address **3 ELYSE DRIVE**

City

NEW CITY

State

NY

Zip Code

10956-3307FEC ID number of contributing
federal political committee.**C**

Name of Employer

MZMCORP

Occupation

CONSTRUCTION

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.834

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JONATHAN HOFFMailing Address **37 KENILWORTH ROAD**

City

RYE

State

NY

Zip Code

10580-1910FEC ID number of contributing
federal political committee.**C**

Name of Employer

CADWALADER, WICKERSHAM & TAFT LLP

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2014

Transaction ID : SA11.757

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SHELDON S. HOROWITZMailing Address **29 ROBERTS RD**

City

NEW CITY

State

NY

Zip Code

10956FEC ID number of contributing
federal political committee.**C**

Name of Employer

SAFE HARBOUR GROUP

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.858

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**1500.00**

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial)

ANDREW INTRATER

Mailing Address 151 E 58TH ST APT 43B

City

NEW YORK

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
COLUMBUS NOVAOccupation
MANAGING PARTNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SA11.830

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARK LICKER

Mailing Address 369 S MAIN ST

City

NEW CITY

State

NY

Zip Code

10956

FEC ID number of contributing
federal political committee.

C

Name of Employer
KAHN & LICKER, LLPOccupation
PARTNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.836

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CRAIG S. MANDEL

Mailing Address 28 CULVER DR

City

NEW CITY

State

NY

Zip Code

10956

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.832

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

JAMES PASCALICCHIO

A.

Mailing Address 16 REDWOOD CT.

City

NANUET

State

NY

Zip Code

10954-3623

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

269.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		04		2014

Transaction ID : SA11.752

Amount of Each Receipt this Period

170.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANTHONY SCALA

B.

Mailing Address 95 BETSY BROWN CIRCLE

City

PORT CHESTER

State

NY

Zip Code

10573-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOWY & DONNATH INC

Occupation

ENGINEER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		06		2014

Transaction ID : SA11.758

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAUL SEID

C.

Mailing Address 22 WOODHAVEN DR.

City

NEW CITY

State

NY

Zip Code

10956-4437

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4290.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : SA11.839

Amount of Each Receipt this Period

800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1220.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial)

PAUL SEID

Mailing Address 22 WOODHAVEN DR.

City

NEW CITY

State

NY

Zip Code

10956-4437

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

4290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.840

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MANISH S. SHAH

Mailing Address 103 PARK STREET

City

WEST CALDWELL

State

NJ

Zip Code

07006

FEC ID number of contributing
federal political committee.

C

Name of Employer

CEROVENE, INC.

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : SA11.859

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL TAGLICH

Mailing Address 98 BAY STREET

City

SAG HARBOR

State

NY

Zip Code

11963-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer

TAGLICH BROTHERS

Occupation

FINANCE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

Transaction ID : SA11.748

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

ROBERT TAGLICH

A.

Mailing Address 7 SAINT MARKS PLACE

City

COLD SPRING HARBOR

State

NY

Zip Code

11724-1825

FEC ID number of contributing
federal political committee.

C

Name of Employer
TAGLICH BROTHERSOccupation
BROKER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Transaction ID : SA11.807

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARK K. WHALEN

B.

Mailing Address 20 VALLEY VIEW CIR

City

WARWICK

State

NY

Zip Code

10990-2719

FEC ID number of contributing
federal political committee.

C

Name of Employer
MECHANICAL CONTRACTORS ASSOCIATIONOccupation
EXECUTIVE DIRECTOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2014

Transaction ID : SA11.794

Amount of Each Receipt this Period

170.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM P. WINTERS

C.

Mailing Address 121 DAISY FARMS DR

City

NEW ROCHELLE

State

NY

Zip Code

10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

Transaction ID : SA11.833

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

670.00

17229.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 21

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Chris Day for Congress

Full Name (Last, First, Middle Initial)
ORANGETOWN REPUBLICAN COMMITTEE

Mailing Address 32 TALLMAN PIKE

City State Zip Code
NYACK NY 10960

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 01 2014

Transaction ID : SA11.813

Amount of Each Receipt this Period

1000.00

IN KIND - TELEPHONE SERVICE

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

1000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

A. BRYON C MCKIM

Mailing Address 14 WILKINS AVE

City	State	Zip Code
COLONIE	NY	12205

Purpose of Disbursement
LEGAL CONSULTING/TRAVEL- MILEAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

1280.33

Transaction ID : SB17.795

B. ALIGRAPHICS

Mailing Address 333 WESTCHESTER AVE SUITE N101

City	State	Zip Code
WHITE PLAINS	NY	10604

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

Amount of Each Disbursement this Period

460.59

Transaction ID : SB17.794

C. AMERICAN EXPRESS

Mailing Address 200 VESEY ST.

City	State	Zip Code
NEW YORK	NY	10285

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.790

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1748.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 200 VESEY ST.

City	State	Zip Code
NEW YORK	NY	10285

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

77.03

Transaction ID : SB17.791

B. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
VIENNA	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2014

Amount of Each Disbursement this Period

34.19

Transaction ID : SB17.792

C. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
VIENNA	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2014

Amount of Each Disbursement this Period

1.23

Transaction ID : SB17.798

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

112.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
VIENNA	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 14 / 2014

Amount of Each Disbursement this Period

153.36

Transaction ID : SB17.799

B. FACEBOOK

Mailing Address 1601 WILLOW RD

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 01 / 2014

Amount of Each Disbursement this Period

61.72

Transaction ID : SB17.789

C. FACEBOOK

Mailing Address 1601 WILLOW RD

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 15 / 2014

Amount of Each Disbursement this Period

751.78

Transaction ID : SB17.800

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

966.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

A. ORANGETOWN REPUBLICAN COMMITTEE

Mailing Address 32 TALLMAN PIKE

City	State	Zip Code
NYACK	NY	10960

Purpose of Disbursement
IN KIND - TELEPHONE SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 01 / 2014

Amount of Each Disbursement this Period

4125.00

Transaction ID : SB17.101564

B. THE CASALE GROUP

Mailing Address 125 LAKE ST

City	State	Zip Code
COOPERSTOWN	NY	13326

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 08 / 2014

Amount of Each Disbursement this Period

525.00

Transaction ID : SB17.797

C. THE JOURNAL NEWS MEDIA GROUP

Mailing Address 1133 WESTCHESTER AVE SUITE N-110

City	State	Zip Code
WHITE PLAINS	NY	10604

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 07 / 2014

Amount of Each Disbursement this Period

2600.00

Transaction ID : SB17.796

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4125.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Day for Congress

Full Name (Last, First, Middle Initial)

A. THE MAILHOUSE

Mailing Address 614 CORPORATE WAY SUITE 8

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2014

City	State	Zip Code
VALLEY COTTAGE	NY	10989

Amount of Each Disbursement this Period

1685.28

Purpose of Disbursement
PRINTINGCategory/
Type

Transaction ID : SB17.793

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1685.28

8638.46